

REQUEST FOR ADDITIONAL ANNUAL FLAT RATE DECALS

EXPIRES AT THE END OF			
[FOID]		YOUR ACCOUNT NO.	

BOARD OF EQUALIZATION
MOTOR CARRIER OFFICE
PO BOX 942879
SACRAMENTO CA 94279-6192

BOE USE ONLY		
RA-B/A	AUD	REG
RR-QS	FILE	REF
EFF		

**READ INSTRUCTIONS
BEFORE PREPARING**

GENERAL INFORMATION

You may use this form to order decals for use fuel vehicles that you wish to add to your Annual Flat Rate Fuel Tax fleet.

You must have a current Annual Flat Rate Fuel Tax account with the State Board of Equalization (BOE), and your account must be in good standing.

DECALS MAY NOT BE TRANSFERRED TO ANOTHER VEHICLE

The fees and/or the decals may not be transferred from one vehicle to another. The decal identifies the vehicle for the purpose of purchasing liquefied petroleum gas (LPG), liquid natural gas (LNG), or compressed natural gas (CNG) without payment of the use fuel tax to vendors. **Sales tax applies to all purchases of LPG, LNG, or CNG, even though the flat rate fuel tax has been paid.**

FILING REQUIREMENTS

The flat rate is an annual tax. The period for which the annual fee payment applies is any 12-month period beginning with the first day of the month in which the payment was made and ending one year thereafter. The BOE, in order to facilitate the administration of the annual flat rate fuel tax program, requires that **when additional vehicles are added, the fees shall be prorated so that vehicles under the same use fuel tax account will have a like starting month.** The fee for vehicles added part-way through the 12-month period is reduced by one-twelfth (1/12) for each month which has passed since the starting month of the 12-month period. For example, the fee for a vehicle added in August to an account with a starting month of March would be seven-twelfths (7/12) of the appropriate fee.

FILING INSTRUCTIONS

PLEASE COMPLETE THE ENCLOSED SUPPLEMENTAL VEHICLE LIST BEFORE COMPLETING THIS FORM. FULL PAYMENT MUST ACCOMPANY THE REQUEST.

Line 1. Add the number of use fuel vehicles listed on the Supplemental Vehicle List and enter the total on line 1.

Line 2. Add the fees (column F) for the vehicles listed on the Supplemental Vehicle List and enter the total amount on line 2.

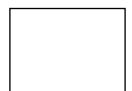
1. Enter the number of additional use fuel vehicles for which you are requesting decals	1.	
2. Enter the total amount of prorated fees for additional decals requested	2.	

I understand that the tax/fee applies to a specific vehicle and is not subject to refund or transfer to another vehicle and that I may be required to file a return showing the total number of gallons used in vehicles for which the flat rate fee has been paid. I certify under the laws of the State of California that the foregoing is true and correct.

SIGNATURE	EMAIL ADDRESS	
PRINT NAME AND TITLE	TELEPHONE ()	DATE

Make check or money order payable to State Board of Equalization.

Always write your account number on your check or money order. Make a copy of this document for your records.



Before preparing read instructions on reverse and follow fee schedule example.

[illegible]

INSTRUCTIONS FOR SUPPLEMENTAL VEHICLE LIST

Payments: You can make your payment by paper check, Online ACH Debit (ePay) or by credit card. To use ePay, go to our website at www.boe.ca.gov, click on the eServices tab and log in to make a payment. To pay by credit card, go to our website or call 1-855-292-8931. Mandatory EFT accounts must pay by EFT or ePay. **Be sure to sign and mail your return.**

Please complete the Supplemental Vehicle List as shown in the example below. You may print or type the required information.

FEE SCHEDULE EXAMPLE

A MAKE	B YEAR	C LICENSE NUMBER	D UNLADEN WEIGHT	E TYPE OF FUEL	F FEE	BOE USE ONLY (Decal Number)
Plymouth	64	SAM123	--	LPG	\$ 21.00	
Chevrolet	72	Z73700	8220	CNG	\$ 70.00	
Ford	78	00737A	6072	LPG	\$ 42.00	
Winnebago	89	2SAM123	--	LNG	\$ 21.00	
TOTAL FEES ENCLOSED					\$ 154.00	

Column A. Indicate the make of vehicle for which you are applying for an Annual Flat Rate Decal.

Column B. Indicate the year of the vehicle for which you are applying for an Annual Flat Rate Decal.

Column C. Indicate the license number of the vehicle for which you are applying for the Annual Flat Rate Decal.

Column D. Does not apply to vehicles with automobile license plates. Fees for all vehicles with commercial plates and subject to weight fees are determined by the unladen weight of the vehicle, which must agree with the unladen weight shown on the vehicle registration card or ownership certificate.

Column E. Use initials for fuel type: Liquefied Petroleum Gas - LPG
Liquid Natural Gas - LNG
Compressed Natural Gas - CNG

Column F. The fee schedule is based upon unladen weight of vehicles which are subject to weight fees. To calculate the fee due on each additional vehicle, please complete the following formula:

Reduce the fee by one-twelfth (1/12) for each month which has passed since the starting month of the 12-month period and enter the result in column F.

Total the vehicles by type. Transfer the total number of vehicles to line 1 on the front of the request. Enter the total amount of fees enclosed on line 2 on the front of the request.

FEE SCHEDULE

TYPES OF VEHICLES AND FEES SCHEDULE	FEE
VEHICLES WITH AUTOMOBILE LICENSE PLATES Passenger vehicles and other vehicles with automobile plates	\$ 36.00
VEHICLES WITH COMMERCIAL PLATES (UNLADEN WEIGHT) 4,000 lbs. or less More than 4,000 lbs. but less than 8,001 lbs. More than 8,000 lbs. but less than 12,001 lbs. More than 12,000 lbs.	\$ 36.00 \$ 72.00 \$ 120.00 \$ 168.00

If you need additional information, please contact the State Board of Equalization, Motor Carrier Office, P.O. Box 942879, Sacramento, CA 94279-0065. You may also visit the BOE website at www.boe.ca.gov or call the Taxpayer Information Section at 1-800-400-7115 (TTY:711); from the main menu, select the option Special Taxes and Fees.